

RFP Page, Section	Question
51, 3.2.8	<p>Section 3.2.4.2.ii states that the DBA shall locate a Provider to treat a Participant when no participating Provider is within Contract access standards.</p> <p>Section 3.2.8 states the Contractor will be liable for provider claims to a provider who is a nonparticipating provider or who does not have an active Provider number in the MMIS.</p> <p>When the DBA pays a claim as a result of making special arrangements with a nonparticipating provider per Section 3.2.4.2.ii, will the DBA be liable for the amount paid to the nonparticipating provider?</p> <p>Response – Section 3.2.4.2.ii means that the DBA will locate a participating Provider outside of the access standards to treat the Participant when a participating provider is not available within said access standards. The line in question under Section 3.2.8 pertains to the liability of the DBA if they pay a nonparticipating provider. The RFP does not contain or provide any permissions for the DBA to pay a nonparticipating provider for any reason.</p>
31, 1.37	<p>If a bidder completes Attachment J for submission with the proposal, should this attachment be included at the end of the materials in Tab O (Additional Required Technical Submissions) or is there another area where it should be placed?</p> <p>Response – Attachment J is not required at time of proposal submission</p>
31, 1.38	<p>If a bidder completes Attachment K for submission with the proposal, should this attachment be included at the end of the materials in Tab O (Additional Required Technical Submissions) or is there another area where it should be placed?</p> <p>Response – Attachment K is not required at time of proposal submission</p>
	<p>Many states procurement efforts offer an opportunity for a tour of current contract facilities. Will the Department consider offering a tour to proposers?</p> <p>Response - No</p>
56, 3.2.10.1.A	<p>Under the subheading 'During the Contract Period' of Network Adequacy Goals, Item 5. states that the DBA shall submit written procedures for assigning the Participants to a PCD at least 30 days prior to the Go-Live date. This makes it a Start-up period task. Should it be tracked under the Start-up or the Contract phase?</p> <p>Response – The DBA can track this under whichever subheading they prefer. The only factor that matters is that the submission occurs 30 days prior to the Go-Live Date.</p>
Various	<p>The RFP requires numerous submissions to the Contract Monitor for approval during the Start-up phase. For planning purposes, should a proposer allow 15 days for approval? In the unlikely event of disapproval, in the absence of other direction in the RFP, should a proposer allow 15 days for deliverable resubmission?</p> <p>Response – Please clarify this question</p>

75, 4.2.4	<p>Section 4.2.4 states the Proposal pages should be consecutively-numbered beginning with Tab B. Does this mean attachments need to be included in the consecutive page numbering in the Proposal as well? Some attachment may have their own pre-printed page numbers (e.g., audited financial statements.)</p> <p>Response – The numbering requirement does not necessarily apply to attachments</p>
48, 3.2.4.C.3	<p>RFP Section 3.2.4.C.3, p. 48, states: “The Participant manual (as described in Section 3.2.10.1(B),” but “Section 3.2.10.1(B)” points to a provider manual requirement and not a participant manual requirement. Please confirm that the RFP Section 3.2.10.1(B) reference is incorrect and does not apply to Section 3.2.4.C.3</p> <p>Response – 3.2.4.C.3 shall now read, “The Participant Handbook (as described in Section 3.2.2.A...” 3.2.4.C.8 shall now read, “Information to assist Providers in relation to billing and/or prior authorization issues, access to the Provider manual (as described in Section 3.2.10.1.B), frequently asked questions, etc.” An Addendum will be posted to eMM/DHMH websites.</p>

RFP Page, Section	Question
47, 3.2.4.B	<p>In RFP Section 3.2.4.B, Grievance and Appeal Handling, Item #5, it states that the DBA shall provide “a clinician (a dentist) for all Dental Administrative Hearings.” Is the Dental Administrative Hearing different from the Fair Hearing (COMAR 10.01.04)? If different, please provide a definition of a Dental Administrative Hearing.</p> <p>Response – Dental Administrative Hearing and Fair Hearing are not different in reference to this RFP. Please do not refer to COMAR for definition.</p>
79, 4.4.2.8	<p>In RFP Section 4.4.2.8, Offeror Qualifications and Capabilities, the item d requirement is for the “Offeror’s process for resolving billing errors.” Please clarify whether this requirement refers to invoicing/billing the purchaser (e.g., DHMH) or situations in which providers erroneously bill participants for services and/or claims processing errors.</p> <p>Response – In the Dental Benefits Administrator RFP, the term “Billing Errors” in Section 4.4.2.8” ...process for resolving billing errors...” pertain to any errors that arise pertaining to billing from MBEs, VSBEs, dental providers, as well as claims errors and adjudication errors received from the Department’s adjudication system which can be determined via the remittance advice. NOTE: Previously posted to eMM/DHMH websites.</p>
74, Table of Contents	<p>The Table of Contents, on page v, includes Section 3.10 in the Scope of Work, starting on Page 74. However, there is no Section 3.10 on page 74 or any other page. Was this section omitted inadvertently? If so, when will the Department issue an addendum including section 3.10?</p>

	Response – An Addendum has been posted that deleted Section 3.10 from the Table of Contents. The “End of Contract Transition” can be found under subsection 3.2.11 – page 63.
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